## PROPERTY LOSS NOTICE

STATE OF ALABAMA FINANCE DEPARTMENT DIVISION OF RISK MANAGEMENT 777 S LAWRENCE ST MONTGOMERY AL 36104 (334) 223-6120 FAX (334) 223-6282

AGY-DIV	Т	PROPERTY LOSSES SHOULD BE REPORTED BY TELEPHONE IMMEDIATELY UPON DISCOVERY. FORWARD THIS COMPLETED FORM AFTER THE PHONE CALL TO RISK MANAGEMENT.						
COVERED PR	OPERTY:							
DEPARTMENT		DIVISION						
LOCATION ITEM #		BUILDING NAME (IF MORE THAN ONE, PROVIDE ATTACHMENT)						
LOSS INFORM	IATION:							
DATE OF LOSS _		_ TIME	LOCATIO	N OF LOSS				
(IF UNKNOWN INDICAT	E DATE FIRST DIS	COVERED)						
		GIVE CITY,	STATE, HIGHW	AY, COUNTY				
CAUSE OF LOSS (CIRCLE ONE)	BURGLARY VANDALISM		WIND FIRE				HAIL 	
NOTE: IF BURGLAF OVER \$1,00		OF FORCIBLE ) POLICE RE				IK()		
NATURE AND EXT	ENT OF DAMAG	3E						
ESTIMATED DOLLA	AR AMOUNT O	F LOSS \$						
NAME, PHONE NUM	MBER & EMAIL	OF CONTACT	PERSON:					
OTHER INSUR	ANCE:							
DO YOU HAVE OTH	HER INSURANO	CE THAT WOUL	LD APPLY TO T	"HIS LOSS?"	Y ( ) N ( )			
IF YES, NAME, ADD					. , . ,			

## LIST CONTENTS ITEMS ONLY:

			FOR OFFICE USE ONLY:				
PROPERTY ITEM	ORIGINAL DATE PURCHASED	CURRENT REPLACEMENT COST	DEPRECIATION	ALLOWANCE			
HEREBY CERTIFY THAT THE INFORMATION COMPLETED ON THIS FORM IS CORRECT AND TRUE TO THE							

HEREBY CERTIFY THA BEST OF MY KNOWLED		MPLETED ON THIS FORM	I IS CORRECT AND	TRUE TO THI
SIGNATURE		DATE		
TTLE		PHONI	E	